Pediatric Emergency Assessment, Recognition, and Stabilization
Instructor Course
Faculty Guide

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Introduction

Welcome to the American Heart Association (AHA) Pediatric Emergency Assessment, Recognition, and Stabilization (PEARS®) Instructor Course Faculty Guide. This guide is for PALS National Faculty, Regional Faculty, and Training Center Faculty who are teaching a PEARS Instructor Course.

At the AHA National Center, we often get questions about how the AHA works overall and where these courses fit into the broader AHA spectrum. The following information answers those questions, and you may find it useful to share with instructor candidates.
Background

- The Early Days
- AHA Mission
- AHA Global Mission
- Emergency Cardiovascular Care Mission
- The Science Process and Why Materials Change Every 5 Years
- Turning Science Into Training
- Making an Impact
- The Instructor-AHA Partnership
- How the PEARS Instructor Course Works
The Early Days

A pioneering group of physicians and social workers formed the first Association for the Prevention and Relief of Heart Disease in New York City in 1915. They were concerned about the lack of heart disease information. At that time, patients with heart disease were considered doomed, limited to complete bed rest. So these physicians conducted studies in New York City and Boston to find out whether patients with heart disease could safely return to work. Similar groups in Boston, Philadelphia, and Chicago evolved into heart associations in the 1920s.

Interest spread widely in other cities across the United States and Canada. Recognizing the need for a national organization to share research findings and promote further study, 6 cardiologists representing several groups founded the AHA in 1924. Here is a timeline of some key dates and events in the AHA’s history:

1924 The AHA was founded.

1948 The AHA was transformed from a scientific society into a voluntary health agency with national headquarters located in New York City.

1975 A rapidly growing AHA moved its National Center to Dallas, Texas, to better serve affiliates and local divisions nationwide.

1980s The AHA gained a foothold as a visible champion of public health. The AHA developed guidelines for the nation’s healthcare system and supported the federal government’s attempt to improve access to healthcare. The AHA focused its planning in 3 areas: cardiovascular science, cardiovascular education and community programs, and fundraising efforts.

Mid-1990s The AHA’s scientific findings began to move more quickly from laboratories and clinics to physicians’ offices and American households.

1995 The AHA’s strategic driving force for moving into the 21st century became providing credible information about heart disease and stroke for effective prevention and treatment.
**AHA Mission**

The AHA mission is to build healthier lives, free of cardiovascular diseases and stroke. That single purpose drives all we do.

The AHA is the nation’s oldest and largest voluntary health organization dedicated to saving people from heart disease and stroke, America’s No. 1 and No. 4 killers, respectively. The association is the trusted leader in emergency cardiovascular care and trains people around the world in how to save lives with CPR and first aid.

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**AHA Global Mission**

Through collaboration with global partners and through knowledge transfer of its proven programs and strategies, the AHA strives to reduce the global burden of cardiovascular disease and stroke.

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**Emergency Cardiovascular Care Mission**

The AHA’s Emergency Cardiovascular Care (ECC) Programs department is responsible for implementing program initiatives and providing guidance and support to the ECC Training Network. The ECC mission supports this responsibility.

The mission of ECC Programs is to reduce disability and death from acute circulatory and respiratory emergencies, including stroke, by improving the Chain of Survival in every community and in every healthcare system.

ECC Guiding Philosophy:

- Improve the Chain of Survival in every community
- Increase quality and timeliness of materials
- Identify and expand training
- Document effectiveness
- Improve efficiency

The goal of ECC Programs is to be the world’s premiere resuscitation organization and serve the global community of scientists, healthcare providers, and citizens as a critical leader in discovery, processing, and transfer of resuscitation science. Its programs, products, and services focus on maximizing survival from life-threatening cardiovascular emergencies.
Scientists and physicians from the International Liaison Committee on Resuscitation (ILCOR) continuously evaluate current and new evidence about resuscitation. Every 5 years, ILCOR holds an International Consensus Conference, during which these scientists and physicians discuss and debate and then come to a consensus about the best ways to apply the science in resuscitation. This is documented in the ILCOR *International Consensus on CPR and ECC Science With Treatment Recommendations*.

The AHA is a member council of ILCOR, and the AHA Guidelines are written on the basis of the ILCOR consensus.

This process allows the AHA to incorporate the most current science into its materials, so that faculty, instructors, and students have up-to-date information on the best practices.
Turning Science Into Training

The 2010 AHA Guidelines for CPR and ECC are based on the most current and comprehensive review of resuscitation literature ever published, the ILCOR 2010 International Consensus on CPR and ECC Science With Treatment Recommendations. The 2010 evidence evaluation process included 356 resuscitation experts from 29 countries who reviewed, analyzed, evaluated, debated, and discussed research and hypotheses through in-person meetings, teleconferences, and online sessions (“webinars”) during the 36-month period before the 2010 International Consensus Conference. The experts produced 411 scientific evidence reviews on 277 topics in resuscitation and emergency cardiovascular care. The process included structured evidence evaluation, analysis, and cataloging of the literature. It also included rigorous disclosure and management of potential conflicts of interest.

The recommendations in the 2010 Guidelines confirm the safety and effectiveness of many approaches, acknowledge the ineffectiveness of others, and introduce new treatments based on intensive evidence evaluation and consensus of experts.

These new recommendations do not imply that care using past guidelines is either unsafe or ineffective. In addition, it is important to note that the new guidelines will not apply to all rescuers and all victims in all situations. The leader of a resuscitation attempt may need to adapt application of these recommendations to unique circumstances. The AHA may update courses if there is a published scientific breakthrough that impacts practices in our educational materials.

Part of the proceeds from AHA courses goes to funding research, which means that the AHA supports the scientists whose research may one day impact our course materials.

The AHA leads the charge in applying evidence-based science into every product it creates.
**Making an Impact**

Saving lives through training is only one way that the AHA reaches you. Here are some others:

- Childhood obesity prevention
- Heart-Check mark
- Go Red For Women®
- Patient and consumer educational materials
- Power To End Stroke®
- *My Heart. My Life.*™
- Advocacy—*You’re the Cure*
- The Guideline Advantage™
- Professional education and professional membership
- Mission: Lifeline®
- Research

For more information visit [www.heart.org](http://www.heart.org).
The Instructor-AHA Partnership

The process for developing course materials is elaborate. After consensus is reached at the ILCOR meetings, the AHA writes its guidelines, and then a wide array of volunteer medical professionals work together with AHA staff, the AHA training department, and discipline-specific consultants to produce the texts and DVDs used in courses.

Courses are tested by members of the AHA and AHA training network, and feedback from the test courses is incorporated into the final product. Every word and image in those texts and DVDs is evaluated, revised, and finally vetted by experts. It’s an extensive, detailed, and time-consuming process. The AHA undertakes this extensive process willingly to produce scientifically accurate and up-to-date course materials.

The AHA-instructor partnership is critical to the success of the courses. The AHA develops the DVD and texts that teach the students the science. The instructors are the hands-on implementers: they evaluate, coach, remediate, and help students learn the skills.

This is critical to the course’s success. The DVD can’t determine if candidates are practicing well—or learning well. The instructors are the ones who help students learn critical skills.

Thank you for helping us save lives.

How the PEARS Instructor Course Works

To become an AHA PEARS Instructor, candidates need to complete an online module. This module is essentially prework, or preparation, for the classroom course, which you teach. The prework allows candidates to maximize their hands-on and practice time with you in the classroom.

There are 4 steps to becoming a PEARS Instructor:

1. Candidates align with a Training Center.
2. Candidates take the online module.
3. Candidates take the classroom course.
4. Candidates are monitored as they teach.
Step 1: Prepare

- Prepare Yourself
- Find or List a Course
- Prepare the Materials and Paperwork
- Prepare the Equipment
- Prepare the Room
- Prepare the Instructor Candidate

Prepare Yourself

Faculty should review all course materials before teaching a course. This is especially true for faculty who have not taught the course recently.

Keep track of how many people are enrolled in the course. Determine how many faculty members are needed to teach and who will be lead faculty. The size for each PEARs Instructor Course is flexible, and there is currently no research-based best instructor-to-student ratio. The practice lessons of the course, however, are designed for a ratio of 7 candidates to 1 faculty member. This will create 1 team, with 1 candidate playing the role of team leader, 5 candidates playing the roles of team members, and 1 candidate acting as the instructor evaluating the “team members.”

To form a team for skills practice, you need at least 3 candidates in a class.
Find or List a Course

Use the AHA’s Find a Course online tool to list the Training Center profile and/or classes scheduled. Instructor candidates are able to access this information through the online tool or by phone at 1-877-AHA-4CPR (242-4277). This tool is for US courses only.

Training Center profile information is entered through the Training Center Coordinator’s access to the AHA Instructor Network. Scheduled classes can be entered through the AHA Instructor Network by either Training Center Coordinators or faculty; however, faculty should check with their Training Center Coordinators for any rules or restrictions the Training Center has established regarding faculty entering their classes.

Many Training Centers also have websites on which they post information about their courses.

Find a Course Tool: www.heart.org/cpr

AHA Instructor Network: www.ahainstructornetwork.org
Prepare the Materials and Paperwork

Once you have decided when you’ll be teaching this course, order any materials you might need. Make sure you have 1 or more copies of all the books instructor candidates will refer to during the class. Also make sure that the candidates each have all the books and materials they will need.

Make sure you have all additional support materials, such as posters or pocket reference cards.

If you need to order manikins, books, or support materials, contact an AHA distributor. The distributors are listed on the Instructor Network.

Only a Training Center Coordinator can order instructor cards.

The materials available for this course are listed here:

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
<th>Where to Get It</th>
<th>How to Use It</th>
</tr>
</thead>
<tbody>
<tr>
<td>Training Center Faculty Guide with Lesson Maps for PEARs Instructor Course</td>
<td>Text with information about how to teach the PEARs Instructor Course</td>
<td>Your Training Center Coordinator</td>
<td>Review it before class and use it during class</td>
</tr>
<tr>
<td>PEARs Instructor Course DVDs</td>
<td>The DVDs contain the material that candidates need to learn and that faculty use to evaluate candidates</td>
<td>AHA distributors</td>
<td>Review it before class and play it during class</td>
</tr>
<tr>
<td>PEARs Provider Course materials; Instructor Manual with Lesson Maps and DVDs</td>
<td>Manuals and DVDs for the PEARs Course</td>
<td>AHA distributors</td>
<td>Review them before class and use them during class; ask candidates to take out the appropriate Lesson Maps when it is time for role-play lessons</td>
</tr>
</tbody>
</table>
### Prepare the Equipment

The following table lists the required equipment for the PEARS Instructor Course:

<table>
<thead>
<tr>
<th>Equipment and Supplies</th>
<th>Quantity Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Paperwork</td>
<td></td>
</tr>
<tr>
<td>Precourse letter</td>
<td>1/instructor candidate</td>
</tr>
<tr>
<td>Course roster</td>
<td>1/course</td>
</tr>
<tr>
<td>Name tags</td>
<td>1/instructor candidate and instructor</td>
</tr>
<tr>
<td>Course agenda</td>
<td>1/instructor candidate and instructor</td>
</tr>
<tr>
<td><em>PEARS Provider Manual</em></td>
<td></td>
</tr>
<tr>
<td><em>PEARS Instructor Manual with Lesson Maps</em></td>
<td></td>
</tr>
<tr>
<td>Learning station competency checklists</td>
<td>1/instructor candidate and instructor</td>
</tr>
<tr>
<td>Team role labels</td>
<td>1 set per station</td>
</tr>
<tr>
<td>Skills station competency checklists</td>
<td>1/instructor candidate</td>
</tr>
<tr>
<td>PEARS Course Progress Checklist</td>
<td>1/instructor candidate</td>
</tr>
<tr>
<td>Core case testing checklists</td>
<td>1/instructor candidate</td>
</tr>
<tr>
<td>CPR Testing Checklist</td>
<td>1/instructor candidate</td>
</tr>
<tr>
<td>ECC Handbook (optional)</td>
<td>1/instructor candidate and instructor</td>
</tr>
<tr>
<td>PEARS algorithms and flowcharts</td>
<td>1 set per class</td>
</tr>
<tr>
<td>PEARS Provider Course written exam</td>
<td>1/instructor candidate</td>
</tr>
<tr>
<td>Blank exam answer sheet</td>
<td>1/instructor candidate</td>
</tr>
<tr>
<td>Written exam answer key</td>
<td>1/course</td>
</tr>
<tr>
<td><em>PEARS Instructor Manual and PEARS Lesson Maps</em></td>
<td></td>
</tr>
</tbody>
</table>

### AV Equipment

<table>
<thead>
<tr>
<th>TV with DVD player OR computer with</th>
<th>2/course</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Equipment and Supplies</strong></td>
<td><strong>Quantity Needed</strong></td>
</tr>
<tr>
<td>---------------------------------------------------------------</td>
<td>------------------------------------------</td>
</tr>
<tr>
<td>projector and screen</td>
<td></td>
</tr>
<tr>
<td>Course DVDs</td>
<td>2/course</td>
</tr>
<tr>
<td><strong>CPR and AED Equipment</strong></td>
<td></td>
</tr>
<tr>
<td>Child or adult CPR manikins with shirt</td>
<td>1/every 3 instructor candidates</td>
</tr>
<tr>
<td>Infant CPR manikins</td>
<td>1/every 3 instructor candidates</td>
</tr>
<tr>
<td>Stopwatch</td>
<td>1/instructor</td>
</tr>
<tr>
<td>Countdown timer</td>
<td>1/instructor</td>
</tr>
<tr>
<td>AED trainer with child AED training pads</td>
<td>1/every 3 instructor candidates</td>
</tr>
<tr>
<td>Stools to stand on for CPR</td>
<td>1/every 3 instructor candidates</td>
</tr>
<tr>
<td><strong>Airway and Ventilation</strong></td>
<td></td>
</tr>
<tr>
<td>Child pocket mask and infant pocket mask</td>
<td>1/every 3 instructor candidates or 1/instructor candidate</td>
</tr>
<tr>
<td>1-way valve</td>
<td>1/every 3 instructor candidates or 1/instructor candidate</td>
</tr>
<tr>
<td>Bag-mask device for infant and child manikins, reservoir, and tubing</td>
<td>1 set/station</td>
</tr>
<tr>
<td>Oral and nasal airways</td>
<td>1/station</td>
</tr>
<tr>
<td>Water-soluble lubricant</td>
<td>1/station</td>
</tr>
<tr>
<td>Nonrebreathing mask/simple face mask</td>
<td>1/every 3 instructor candidates</td>
</tr>
<tr>
<td>Nasal cannula</td>
<td>1/station</td>
</tr>
<tr>
<td>Suction catheters (various sizes)</td>
<td>1/station</td>
</tr>
<tr>
<td><strong>Rhythm Recognition and Electrical Therapy</strong></td>
<td></td>
</tr>
<tr>
<td>ECG cards or rhythm generator</td>
<td>1/station</td>
</tr>
<tr>
<td>Monitor capable of defibrillation/synchronized cardioversion with small (pediatric) and large (adult) paddles</td>
<td>1/station</td>
</tr>
<tr>
<td>Electrodes, electrode pads (pediatric and adult), electrode cream or paste (if self-adhesive monitor/electrode pads are not used)</td>
<td>1/station</td>
</tr>
<tr>
<td>Spare batteries or power cord</td>
<td>1/station</td>
</tr>
<tr>
<td>Spare ECG paper</td>
<td>1/station</td>
</tr>
<tr>
<td><strong>Some Recommended Drugs or Drug Packages</strong></td>
<td></td>
</tr>
<tr>
<td>Adenosine</td>
<td>1/station</td>
</tr>
<tr>
<td>Albuterol</td>
<td>1/station</td>
</tr>
<tr>
<td>Amiodarone</td>
<td>1/station</td>
</tr>
<tr>
<td>Atropine sulfate</td>
<td>1/station</td>
</tr>
<tr>
<td>Epinephrine 1:10 000, 1:1000, racemic (2.25%)</td>
<td>1/station</td>
</tr>
<tr>
<td>Glucose</td>
<td>1/station</td>
</tr>
<tr>
<td>Lidocaine</td>
<td>1/station</td>
</tr>
</tbody>
</table>
### Equipment and Supplies

<table>
<thead>
<tr>
<th>Equipment and Supplies</th>
<th>Quantity Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Magnesium sulfate</td>
<td>1/station</td>
</tr>
<tr>
<td>Procainamide</td>
<td>1/station</td>
</tr>
<tr>
<td><strong>Vascular Access</strong></td>
<td></td>
</tr>
<tr>
<td>IO manikin</td>
<td>1/station</td>
</tr>
<tr>
<td>IO needles</td>
<td>1/station</td>
</tr>
<tr>
<td>IV equipment (catheters, fluid bags, tubing, 3-way stopcocks, T-connectors, pole)</td>
<td>1/station</td>
</tr>
<tr>
<td>Syringes</td>
<td>1/station</td>
</tr>
<tr>
<td>Safety</td>
<td></td>
</tr>
<tr>
<td>Sharps container (if using real needles)</td>
<td>1/station</td>
</tr>
<tr>
<td><strong>Other</strong></td>
<td></td>
</tr>
<tr>
<td>Length-based, color-coded resuscitation tape</td>
<td>1/station</td>
</tr>
<tr>
<td>Towel</td>
<td>1/station</td>
</tr>
<tr>
<td>Blood pressure cuff</td>
<td>1/station</td>
</tr>
<tr>
<td>Stethoscope</td>
<td>1/station</td>
</tr>
<tr>
<td>Whiteboard or flip chart with easel and markers</td>
<td>1/station</td>
</tr>
<tr>
<td>Manikin cleaning supplies</td>
<td>Varies</td>
</tr>
</tbody>
</table>

---

**Prepare the Room**

You can teach an average instructor course of 7 instructor candidates with 1 faculty member in 1 large room. The room should comfortably accommodate the candidates with open space at the front of the classroom for manikins, candidates, chairs, tables, and space to move around easily. An average instructor course of 14 instructor candidates can be taught with 2 faculty members in 1 large room and 2 small rooms. The large room should comfortably hold at least 20 people. The smaller rooms must hold 7 candidates plus an instructor and the required equipment.

The rooms should have

- Good acoustics
- Good lighting that can be dimmed or adjusted for video presentations
- An instructor-controlled DVD player and screen large enough to be viewed by all candidates
- Ideally, carpeted floors for skills practice
- A chair for each instructor candidate
Sample Room Floor Plan

- **= Manikin**
- **= Instructor Candidate**
- **= Training Center Faculty (TCF)**
- **= Table**
Prepare the Instructor Candidate

Prerequisites
The instructor course is an intensive course for those individuals who have already successfully completed the discipline-specific provider course. This course is designed to train instructor candidates to conduct provider and update courses on the latest AHA guidelines and skills set for the specific discipline being taught. The role and scope of practice of healthcare providers vary greatly globally, so there are no profession-specific guidelines for becoming an AHA instructor in a specific discipline. Instructor candidates should exemplify integrity, demonstrate strong ethics, communicate clearly, and model a dedication to quality training.

Instructor candidates must meet certain requirements before taking the instructor course. Before attending the PEARS classroom portion of an instructor course, all instructor candidates must

- Be at least 18 years of age
- Be licensed or certified in a healthcare occupation in which PEARS skills are within their scope of practice
- Be aligned with an AHA Training Center
- Have a current/official AHA PEARS Provider course completion card
- Be proficient in the skills of PEARS
- Complete PEARS Instructor Essentials
- Complete an Instructor Candidate Application

This instructor course has 2 parts. The first part is the PEARS Instructor Essentials module, which contains essential information about teaching PEARS for the AHA. Every candidate must take this module. Faculty need to take the Instructor Essentials module as well so that they know what to expect from the instructor candidates.

The second part is the classroom portion, which you lead.

The goal of dividing the course into online and classroom-based portions is to maximize in-class learning and make sure that candidates get as much hands-on practice time with an experienced faculty member as possible.

If you have any questions about prerequisites, please consult your Training Center Coordinator or Regional Faculty, and/or refer to the *Program Administration Manual* (PAM).

Forms
We recommend sending a letter or email to candidates before the course starts. A sample of a precourse letter follows; you may edit it to
suit your needs. It should include information about when and how to return all forms and proof that all prerequisites have been met.

Sample Precourse Letter to Instructor Candidates

(Date)

Dear Instructor Course Candidate:

Welcome to the instructor course.

When and Where
The class will be

Date: ________________________
Time: ________________________
Location: ________________________

Please plan to be on time because it will be hard for late students to catch up once we start.

How to Get Ready
The instructor course covers a lot of material in a short time. Please bring your Instructor Manual with Lesson Maps, Provider Manual, and Instructor Candidate Workbook with you to class. They will help you learn more during the course and make you more comfortable with the material. You will also need to bring your completion certificate from the Instructor Essentials online module.

What to Wear
Please wear loose, comfortable clothing. You will be practicing skills that require working on your hands and knees, bending, standing, and lifting.

Special Considerations
If you have any physical conditions that might prevent these activities, please tell one of the faculty members before the class. The faculty may be able to adjust the equipment if you have back, knee, or hip problems. Also please tell your faculty member if you are allergic to latex.

We look forward to welcoming you on _______ (day and date of class) _______. If you have any questions about the course, please call _______ (name) _______ at _______ (telephone number) _______.

Sincerely,

(Title)
Step 2: Teach

- Overview of Competencies
- Ethical and Professional Considerations
- Faculty Role and Video-Based Lessons
- Using Lesson Maps
- Sample Course Agenda
- Course Outline
- Cleaning Manikins
- PALS and PEARS Audiences
- Debriefing the Debriefers

Overview of Competencies

The goal of this course is to prepare candidates to teach PEARS Provider classes. Each of the learning stations is designed to help students learn in situations that are as close to real life as possible. Educational research suggests that this is one of the most effective ways to prepare students for real-life emergencies. The closer you can make the scenarios to real-life situations, the better.

The candidates should be competent in all of the following:

- **Skills:** Instructors need to be proficient in all the skills of the disciplines they teach.
- **Course delivery:** Instructors need to teach AHA materials correctly and as they were intended.
- **Testing:** Instructors have to be able to test students effectively.
- **Professionalism:** Instructors need to maintain a high standard of ethics and professionalism when teaching AHA courses.
- **Program administration:** Instructors need to be able to manage time, space, materials, and paperwork in compliance with AHA guidelines.
Ethical and Professional Considerations

There are 2 main reasons why it’s especially important for faculty to behave impeccably when it comes to ethics and professional behavior. The first is that it’s important to the overall AHA mission, and the second is that faculty teach candidates through their actions as well as their words.

Faculty and the Mission

The main goal of the AHA is to save as many lives as possible. To that end, the AHA is committed to teaching lifesaving skills such as CPR.

It’s crucial that instructors be prepared both to teach well and to test their students well. Faculty have the responsibility to pass candidates when, and only when, candidates are ready. If candidates aren’t ready, they won’t be able to teach and test students well, and the students may miss out on learning lifesaving skills.

Ethical Teaching Under Pressure

Instructors can be under pressure to pass students who don’t necessarily have the skills to pass. Sometimes an instructor may have his boss or a friend in a class. Other times, an instructor may be worried about the repercussions for her Training Center or business if the client/student isn’t happy. Or a student may not be able to work without a course completion card, a situation that can evoke sympathy in an instructor. There are a number of complicated reasons why an instructor may be inclined to let a student slide and then pass the student before the student is ready.

When it comes to testing and issuing course completion cards, the instructor candidates need to understand what’s at stake. Faculty can help candidates by acknowledging the complexities of some situations and by clarifying instructor responsibilities.

Ethical Faculty Behavior

Model ethical behavior in all aspects of your class, especially in testing. Showing instructor candidates how to behave is far more compelling than simply telling them.
Faculty Role and Video-Based Lessons

There are 2 key elements to this course (and all AHA courses). The AHA provides the content, and the faculty make sure that instructor candidates have learned, and can adequately perform, the skills necessary for teaching a course.

The AHA uses a rigorous process to determine the best practices on the basis of scientific evidence. (See Introduction for details on how the AHA science process works.) Once the AHA guidelines are written, then the course content is determined. The content is provided in the video.

The faculty implement the content, making sure that instructor candidates know how to do the things that are shown in the video. Faculty members monitor, observe, and coach instructor candidates so that candidates are then ready to teach students. Giving candidates immediate feedback during skills practice helps them learn.

Using videos and dedicating significant time to role playing are effective tools in helping candidates learn. Using the video also helps make sure that instructor courses are consistent across the world, so that all instructors learn the same skills, and Training Centers know exactly what it means if an instructor says that she has completed instructor training.

Using Lesson Maps

Lesson Maps tell faculty what is going on and what is coming next. Faculty use them during class to keep the class running smoothly and to model how to use Lesson Maps for the instructor candidates. (All instructors also use Lesson Maps in their courses.)

Some instructors don’t realize the importance of using Lesson Maps. As a result, the students don’t learn everything they need to perform in a real emergency.

If the faculty emphasize the importance of using Lesson Maps, then instructors are more likely to follow them and students are more likely to learn what they need to know.
Here’s a sample Lesson Map, with all the numbers, letters, and icons explained.

Use Lesson Maps as shown here:

<table>
<thead>
<tr>
<th>When</th>
<th>Then you can</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Before you teach</strong></td>
<td>Review the maps to understand</td>
</tr>
<tr>
<td></td>
<td>• The objectives for each lesson</td>
</tr>
<tr>
<td></td>
<td>• Your role for each lesson</td>
</tr>
<tr>
<td></td>
<td>• The resources that you need for each lesson</td>
</tr>
<tr>
<td><strong>As you teach</strong></td>
<td>Follow each Lesson Map as you conduct the course.</td>
</tr>
<tr>
<td></td>
<td>• Remind candidates what they will see in each video segment.</td>
</tr>
<tr>
<td></td>
<td>• Make sure you have all resources and supplies ready for each lesson.</td>
</tr>
<tr>
<td></td>
<td>• Make notes on your Lesson Maps, such as what page numbers to reference in Instructor Manuals.</td>
</tr>
</tbody>
</table>
The following is a sample course agenda. You may alter it slightly, depending on when you want to incorporate breaks, etc.

### Sample Agenda for PEARS Instructor Course

14 Students, 2 PEARs Faculty  
Approximately 8 hours with breaks

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:30</td>
<td>Welcome</td>
</tr>
<tr>
<td>8:35</td>
<td><strong>Lesson 1</strong>: Course Overview: Purpose and Expectations</td>
</tr>
<tr>
<td>8:40</td>
<td><strong>Lesson 2</strong>: Conducting Large-Group Discussion</td>
</tr>
<tr>
<td></td>
<td>Divide class into 2 groups</td>
</tr>
<tr>
<td>9:00</td>
<td>Group 1</td>
</tr>
<tr>
<td>10:00</td>
<td>Break</td>
</tr>
<tr>
<td></td>
<td>Divide class into 2 groups</td>
</tr>
<tr>
<td>10:15</td>
<td>Group 1</td>
</tr>
<tr>
<td>10:45</td>
<td>Group 2</td>
</tr>
<tr>
<td></td>
<td>Divide class into 2 groups</td>
</tr>
<tr>
<td>11:15</td>
<td>Group 2</td>
</tr>
<tr>
<td></td>
<td>Divide class into 2 groups</td>
</tr>
<tr>
<td>12:15</td>
<td>Lunch</td>
</tr>
<tr>
<td></td>
<td>Divide class into 2 groups</td>
</tr>
<tr>
<td>1:00</td>
<td>Group 1</td>
</tr>
<tr>
<td>3:00</td>
<td>Group 2</td>
</tr>
<tr>
<td></td>
<td>Divide class into 2 groups</td>
</tr>
<tr>
<td>3:15</td>
<td><strong>Lesson 7</strong>: Training Center–Specific Policies</td>
</tr>
<tr>
<td>3:45</td>
<td><strong>Lesson 8</strong>: Written Exam</td>
</tr>
<tr>
<td>4:15</td>
<td><strong>Lesson 9</strong>: Summary</td>
</tr>
<tr>
<td>4:30</td>
<td>Course Ends</td>
</tr>
<tr>
<td></td>
<td>One large group</td>
</tr>
<tr>
<td></td>
<td>One large group</td>
</tr>
</tbody>
</table>
## Outline for PEARs Instructor Course

<table>
<thead>
<tr>
<th>Lesson Identifier</th>
<th>Course Event</th>
<th>Type of Lesson, Minutes</th>
</tr>
</thead>
<tbody>
<tr>
<td>PALS INSTRUCT START</td>
<td>Welcome</td>
<td>5</td>
</tr>
<tr>
<td>PEARS INSTRUCT 1</td>
<td>Course Overview: Purpose and Expectations</td>
<td>5</td>
</tr>
<tr>
<td>PEARS INSTRUCT 2A-2C</td>
<td>Conducting Large-Group Discussion</td>
<td>20</td>
</tr>
<tr>
<td>PEARS INSTRUCT 3A-3B</td>
<td>Conducting Large-Group Discussion Practice</td>
<td>60</td>
</tr>
<tr>
<td>PEARS INSTRUCT 4</td>
<td>Conducting the Optional Skills Practice Stations</td>
<td>60</td>
</tr>
<tr>
<td>PEARS INSTRUCT 5</td>
<td>Conducting BLS Competency Testing</td>
<td>60</td>
</tr>
</tbody>
</table>
Cleaning Manikins

Follow the same procedures for cleaning manikins as you would during a provider course. Instructor candidates need to know about the Equipment Decontamination Guidelines for CPR Training on the Instructor Network. Also remind them that they will need to follow their Training Center’s policies for cleaning equipment.

PALS and PEARs Audiences

Instructors need to know the difference between the audiences for the PALS and PEARs courses.

PEARs is designed for healthcare providers who might encounter pediatric patients in their profession but who do not routinely provide care for children with high-acuity illness or injury. This course is NOT intended for those who

- Require credentialing in advanced pediatric skills
- Are routinely involved in resuscitation

Those students should take the PALS course.

The PALS course is designed for healthcare providers who deliver advanced life support during the initial phase of a pediatric emergency, either in or out of the hospital.
Debriefing the Debriefer

Guiding Principles

- PALS facilitators should follow the Gather-Analyze-Summarize (GAS) format for debriefing.
- Facilitators should address the main learning objectives for each case and, in particular, identify performance gaps that arise and pertain to the learning objectives.
- Not all learning objectives will be covered during the debriefing, but critical errors must be discussed.
- Both medical objectives and team dynamics should be discussed during each debriefing.

Debriefing the Debriefer Strategies

- Take notes during the debriefing, and write down exactly what was said and how it was phrased:
  - Did you notice something that was unusual or awkward?
  - Was there a particular question that was phrased poorly?
  - Did the debriefer fail to address a glaring performance gap?
- Follow the GAS framework. For each performance gap, ask yourself
  - Did the debriefer use an observation (or paraphrase a learner comment) as the basis of the discussion for the Gather section?
  - Did the debriefer appropriately Analyze the performance gap and close the performance gap?
  - Did the debriefer Summarize effectively?

Failure to follow each of these steps for a particular performance gap warrants discussion during your debriefing of the debriefer.

Don’t assume you know why the facilitator decided to address a specific issue in a particular way. The best way to provide good feedback is to understand why the facilitator did things the way he or she did.
Debriefing the Debriefer Framework

<table>
<thead>
<tr>
<th>Observation: Debriefer Performance Gap</th>
<th>Your Point of View</th>
<th>Elicit Learner Point of View</th>
<th>Close Performance Gap</th>
</tr>
</thead>
<tbody>
<tr>
<td>I noticed….</td>
<td>It made me think….</td>
<td>What were your thoughts at that time?</td>
<td>How do you think you would alter things next time?</td>
</tr>
<tr>
<td>I heard that….</td>
<td>It made me feel….</td>
<td>What was your reasoning at that time?</td>
<td>How would you change things next time?</td>
</tr>
<tr>
<td>I heard you saw….</td>
<td>I was thinking….</td>
<td>What did you think at the time?</td>
<td>How would your questioning be different next time?</td>
</tr>
<tr>
<td>When you said….</td>
<td>I was concerned….</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I observed that….</td>
<td>I was worried….</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Step 3: Test

- How to Test Instructor Candidates
- Monitoring Instructor Candidates

**How to Test Instructor Candidates**

Instructor candidates take a written exam at the end of the course. They must score 84% or higher to pass.

You can get the written exam from your Training Center Coordinator.

Candidates who do not pass the written exam the first time may take a second version of the test.

**Monitoring Instructor Candidates**

After completing the instructor course, the instructor must be monitored by a faculty member while teaching. It may take several classes before an instructor candidate is ready to teach on her own. The faculty member determines when the candidate is ready to teach on her own. At that point, an instructor card is issued. Refer to the PAM for specific instructions about filling out an instructor card.

You can get an instructor card from your Training Center Coordinator.
Step 4: Close

- Participant Evaluations
- Next Steps
- Paperwork
- Renewal
- Mentoring

Participant Evaluations

Get course evaluation forms from your Training Center Coordinator. Give the instructor candidates the evaluation so that they can let you know how they thought the class went: what worked and what didn’t.

Evaluations are required and can be very useful tools. Looking at several sets of evaluations can show faculty which parts of their classes are working well from the candidates’ perspective. Evaluations can also show what’s confusing to candidates and where candidates might need more help; faculty can then adapt their teaching styles to help candidates learn better.

As the class draws to an end, hand out evaluations to instructor candidates. Collect them when candidates are finished. Read them carefully and decide how to strengthen your teaching. Turn them in to your Training Center, along with the rest of your paperwork, according to your Training Center’s policies.

Next Steps

Let the instructor candidates know what they will be expected to do after this course ends. Explain how monitoring works, and remind them of the resources they have at their disposal, particularly the Instructor Network. Let them know that their Training Centers will have their own specific policies as well.

Paperwork

Complete the postcourse paperwork. Make sure that the roster was accurate and that you have a grade report and summary evaluation.

Renewal

The PAM has information on renewing instructors’ credentials.
Mentoring

Mentoring is a nonevaluative process through which both a mentor and a mentee can strengthen their skills and deepen their knowledge.

Instructor candidates should have a mastery of the provider skills before taking this course. The teaching skills the candidates learn in this course are an important step toward mastery of PEARs instruction.

After this course is completed, and after the instructor has been monitored and received an instructor card, she is ready to teach. More experienced instructors and faculty can help her become a better instructor by mentoring and sharing wisdom gleaned through years of experience. Mastering subject matter and skills takes a long time; less experienced instructors can benefit from the wisdom of more experienced instructors.

Instructors can also mentor students, particularly in terms of professionalism, teamwork, communication, and quality of performance. Encourage instructor candidates to mentor their students.

Through conversations with mentees, mentors often strengthen their own skills. They get new perspectives, think through new challenges, and often clarify their own thinking. Mentoring is a mutually beneficial relationship. Please consider mentoring a new instructor and encourage new instructors to seek mentors. Mentoring is one the best ways to build expert instructors and, consequently, one of the best ways to help more people save lives.
## Step 5: Keep Current

- Resources for AHA Updates
- Maintaining Faculty Status
- Forms

### Resources for AHA Updates
Check the Instructor Network for any AHA updates. Overall, the best resources for an instructor are the Training Center and the PAM.

### Maintaining Faculty Status
To teach instructor courses, faculty need to maintain their faculty status. Faculty who want to know more about maintaining their status should refer to the PAM, which has detailed information on the subject.

### Forms
For forms, such as the Instructor Renewal Form and Course Evaluation, please refer to the Instructor Network or consult your Training Center Coordinator.
Lesson Maps
**Your Role**

- Determine
  - Number of instructor candidates
  - Special needs or equipment
- Reserve equipment
- Schedule room
- Schedule additional faculty if needed
- Determine course specifics

Reference
PEARS Faculty Guide
Your Role

- Ensure that instructor candidates are sent precourse letters with materials and that the letters specify any precourse assignments
- Confirm additional faculty
Your Role

- Confirm room reservations and setups
- If you need additional faculty, given the class size, coordinate with the other faculty
- Make sure all equipment is available and working
- Make sure all course paperwork is in

Reference
None
Day of Course

Your Role
- Greet instructor candidates as they arrive to put them at ease
- Pass out supplies
- Have instructor candidates fill out the course roster
- Collect instructor candidates’ certificates of completion from the PALS online module

Reference
None
Welcome

Instructor Candidate Objectives
- Get acquainted with instructors and other instructor candidates

Your Role
- Introduce instructors
- Invite instructor candidates to introduce themselves
- Explain layout of facilities and course logistics
- Explain that parts of the course are somewhat strenuous
- Ask that anyone with a medical concern, such as knee or back problems, talk with one of the instructors
- Tell the instructor candidates, “We are scheduled to end at ____”

Instructor Candidate Role
- Introduce self
- Listen to instructor

Resources
- PEARS® Faculty Guide

Reference
PEARS Instructor Manual
Course Overview:
Purpose and Expectations

Instructor Candidate Objectives
- Explain steps to becoming an instructor

Instructor Candidate Role
- Listen to instructor

Your Role
- Explain the purpose of the course and the following expectations:
  - That candidates have completed the Instructor Essentials online module
  - That they will have to pass the written Instructor Course exam
  - That they will have to be monitored to get their instructor cards

Resources
- None

Reference
PEARS Instructor Manual
**Instructor Candidate Objectives**
- Explain the group discussion in PEARS

**Instructor Candidate Role**
- Watch video
- Ask questions

**Your Role**
- Explain the format of the core cases on the provider DVD
- Explain how to use scenario cards
- Explain the purpose of large-group interactive discussion
- Show the PEARS Systematic Approach segment of the PEARS Instructor Course DVD

**Resources**
- PEARS Instructor Course DVD
- PEARS Instructor Manual

**Reference**
PEARS Provider Manual
Core Cases
Explain the core case format on the PEARS Provider Course DVD:
• First a clip of a sick child plays
• Then the video pauses for students to form an initial impression
• Then the same clip plays again, this time with information on the child’s heart rhythm and oxygen saturation
• Then the video pauses for students to refine their assessments
• Then students discuss classification, severity of illness, and the primary assessment. Explain the options students have to help with primary assessment (capillary refill, lung sounds, and full cardiac monitor)
• Then the video plays the same clip and includes a summary of what the students should have determined

Scenario Cards
• Explain that scenario cards match information on the video and have additional information
• Explain the line on the scenario cards that separates information that students should know from information they haven’t learned yet
• Explain the instructor points for discussion and that they should review them at the end of each core case they teach

Large-group interactive discussion in Provider Course
• Explain that discussion is not a time to lecture but to get the students to follow the systematic approach to identify the patient case issues
• Discuss how to elicit information from students if the group is quiet and not actively engaged
Lead a 5- to 10-minute discussion on challenging learners

Some typical challenging learners:
• Unprepared student
• Anxious student
• Dominating student
• Bored student

Some general strategies for addressing challenging learners:
• Acknowledge the learner and then redirect:
  “Thanks for contributing, Student. Now, let's talk about…”
• Use neutral criticism, focused on the work rather than on the person:
  “Compressions should be at least 100/min” vs “You’re not going fast enough”
• When you can, acknowledge what the student is doing well/right before introducing a criticism

Some good general strategies for leading discussions:
• Asking probing or open-ended questions
• Listening to students and building on their comments
• Clarifying student comments
• Paraphrasing student comments
• Encouraging quieter members to participate (“Let’s hear from someone who hasn’t spoken yet”)
Conducting Large-Group Discussion Practice

Instructor Candidate Objectives
- Explain the group discussion in PEARS

Instructor Candidate Role
- Facilitate group discussion
- Ask questions

Resources
- PEARS Provider Course DVD
- PEARS Instructor Manual

Your Role
- Rotate candidates through each scenario to provide each candidate the opportunity to facilitate the large-group discussion (5 minutes)
- Provide positive and corrective feedback to candidates on their facilitating the group discussion (5 minutes)
- Emphasize the importance of the audience level. PEARS needs to be kept simple
- The rotation schedule on the next page can be adapted depending on the number of students in your course

Reference
PEARS Instructor Manual 10
### Rotation Schedule, Scenarios

<table>
<thead>
<tr>
<th>Instructor</th>
<th>C 1</th>
<th>C 3</th>
<th>C 5</th>
<th>C 7</th>
<th>C 2</th>
<th>C 4</th>
<th>C 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>Team Leader</td>
<td>C 2</td>
<td>C 4</td>
<td>C 6</td>
<td>C 1</td>
<td>C 3</td>
<td>C 5</td>
<td>C 7</td>
</tr>
<tr>
<td>Airway</td>
<td>C 3</td>
<td>C 5</td>
<td>C 7</td>
<td>C 2</td>
<td>C 4</td>
<td>C 6</td>
<td>C 1</td>
</tr>
<tr>
<td>IV/IO/Meds</td>
<td>C 4</td>
<td>C 6</td>
<td>C 1</td>
<td>C 3</td>
<td>C 5</td>
<td>C 7</td>
<td>C 2</td>
</tr>
<tr>
<td>Monitor/Defibrillator</td>
<td>C 5</td>
<td>C 7</td>
<td>C 2</td>
<td>C 4</td>
<td>C 6</td>
<td>C 1</td>
<td>C 3</td>
</tr>
<tr>
<td>Compressor</td>
<td>C 6</td>
<td>C 1</td>
<td>C 3</td>
<td>C 5</td>
<td>C 7</td>
<td>C 2</td>
<td>C 4</td>
</tr>
<tr>
<td>Recorder/Timekeeper/Observer</td>
<td>C 7</td>
<td>C 2</td>
<td>C 4</td>
<td>C 6</td>
<td>C 1</td>
<td>C 3</td>
<td>C 5</td>
</tr>
</tbody>
</table>

**PEARS INSTRUCT 3B**
Conducting the Optional Skills Practice Stations

Instructor Candidate Objectives
• Show skills at stations as a participant
• Show skills as the instructor at the stations

Resources
• AV equipment
• PEARs Instructor Course DVD
• Skills station checklists
• Respiratory equipment
  – Stethoscope
  – Oxygen delivery devices: nasal cannula, simple oxygen mask, nonrebreathing mask with reservoir
  – Suctioning devices, OPA, bag-mask device
  – Nebulizer equipment, MDI, spacer devices
• Circulatory equipment
  – ECG monitor
  – IV equipment, syringe, 3-way stopcock
  – Epinephrine autoinjector
  – Color-coded length-based resuscitation tape

Your Role
• Explain purpose of the optional skills stations in Provider Course
  – It is an evaluation of the student’s skills, not an opportunity for the instructor to lecture
  – Use this time to provide coaching and feedback to students
  – Ensure that practice is purposeful
• Have each candidate be the “instructor” guiding the practice station for respiratory equipment or circulatory equipment (for no more than 5 minutes)
• The “instructor” should review equipment and then evaluate another candidate (playing a “student”) using the equipment
• Provide feedback to candidates on their performance facilitating the skills station (5 minutes)
• Make note of any candidates who don’t perform PEARs skills correctly. They may need additional training and remediation before becoming instructors

Instructor Candidate Role
• Participate in management of respiratory and circulatory emergencies
• Act as instructor in 1 skills station

Reference
PEARs Instructor Manual
**Instructor Candidate Objectives**
- Show BLS skills as a participant
- Evaluate BLS skills as the instructor at the station

**Your Role**
- Have all the candidates work together to set up the BLS skills testing station by using Lesson Map PEARS 11A in their PEARS Instructor Manual (5 minutes)
- Allow 5 minutes for 1 instructor candidate acting as the “instructor” to evaluate 2 candidates (“students”) on BLS skills while other candidates observe. The candidate should evaluate BLS skills by using
  - 1- and 2-Rescuer Child BLS With AED Skills Testing Sheet
  - 1- and 2-Rescuer Infant BLS Skills Testing Sheet
- The “instructor” should provide feedback to the “student” after the skills evaluation
- You provide feedback to the “instructor” on the “instructor's” evaluation of and feedback to the “student”
- Rotate to each candidate to act as “instructor” and repeat the process, beginning with the second bullet in this box (12 minutes)

**Resources**
- Child and infant manikins
- Pocket masks
- Bag-mask device
- AED trainer
- Stopwatch or timer
- BLS skills testing sheets

**Instructor Candidate Role**
- Act as instructor conducting 1 BLS skills test
- Be evaluated performing BLS skills

**Reference**
PEARS Instructor Manual
Instructor Candidate Objectives

- Effectively facilitate a core case simulation

Your Role

- Review Team Dynamics Debriefing Tool on the Instructor Network
- Show the Case Scenarios video
- Have each candidate rotate as an “instructor” conducting a core case simulation and using the Putting It All Together case scenario cards (in the PEARs Instructor Manual)
- Observe candidates who are team members and the candidate functioning as the “instructor” (10 minutes)
- “Instructor” provides feedback to the team (5 minutes)
- You provide feedback to the “instructor” facilitating the case simulation (5 minutes)

Reference
PEARs Instructor Manual
Key Points to Emphasize

- High-quality CPR
- Team leader role
- Team dynamics
- Using algorithms and flowcharts
Instructor Candidate Objectives

- Explain TC-specific policies and where to get more information

Instructor Candidate Role

- Write answers to TC-specific questions in the Candidate Workbook

Your Role

- Discuss AHA and TC-specific policies
- Have candidates complete the TC-specific sections of their Candidate Workbooks

Resources

- PALS Candidate Workbook

Reference

PEARS Instructor Manual
Training Center–Specific Policies

Explain what a TC is

Discuss ethics, specifically:
• Appropriate behavior
• Avoiding fraudulent behaviors

Tell candidates the following about course materials and cards:
• How to get cards
• How to get and secure exams
• That instructors must have their own Instructor Manuals
• That students must have their own Provider Manuals before, during, and after the course
• That all appropriate videos must be used in each course
• That there are different skills check sheets and the right one must be used at each station
• That stopwatches must be used

Explain requirements, the Instructor Network, and paperwork:
• Explain monitoring (including that it must be done by an RF or TCF)
• Explain renewal requirements and any TC-specific requirements. Also, tell candidates that they need to keep duplicate copies of their own records
• Show how to complete paperwork and discuss how to file it, including any relevant TC-specific policies
• Explain the Instructor Network: how to navigate it and how to find required course materials
• Have candidates review Chapter 3 of the PAM

Provide any additional TC-specific policies:
• Contact information for TC personnel
• How to handle skills testing
• Anything else specific to the TC
PEARS INSTRUCT

8

Written Exam

Resources
- PALS Instructor Course DVD
- Written exams
- Answer sheets
- Answer key

Instructor Candidate Role
- Take written exam

Instructor Candidate Objectives
- Complete written exam

Your Role
- Pass out the exam
- Proctor the exam
- Collect and score each exam
- Review the answers by using the answer key with the candidates
- Provide remediation as needed

Reference
PEARS Instructor Manual
Instructor Candidate Objectives

- Explain next steps and resources

Resources

- Instructor course evaluations

Your Role

- Discuss
  - Next steps
  - Resources for finding more information
- Distribute and collect course evaluations

Instructor Candidate Role

- Listen to faculty
- Complete course evaluation

Reference

PEARS Faculty Guide